## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10786496

CLAIMS AS FILED - PART I									NITITI			
_			(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			15					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
Т	OTAL CHARGE	ABLE CLAIMS	/S minus 20=		*			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			Vm	ninus 3 =	•			X43=	·	OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	1	3	+290=	
* If the difference in column 1 is less than zero, enter "0" in column						column 2	l	TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>		-	
		(Column 1)	(Column 2			(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF MI	Minus	***	CL AIA	=		X43=		OR	X86=	
	,	ENTATION OF WI	JEHPLE DE	PENDENT	CLAIM			+145=		ÖR	+290=	
į	8				•		<u> </u>	TOTAL		OR	TOTAL	
	ļ	А	DDIT. FEE	<b>-</b>	] • ,	ADDIT FEE						
В		(Column 1) CLAIMS		(Colum	ST	(Column 3)	Г		ADDI-	3 r		ADDI-
MENDMENT		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	122
	Independent	*	Minus	***		=	T	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7.10-		OR	X00=	
								+145=		OR	+290=	
								TOTAL DDIT. FEE	·	OR A	TOTAL DDIT. FEE	
		•	•			·	· ·					
5 L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, , , ,
	Independent		Minus	***		=	-	X43=				ī
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						$\perp$	A43=		OR	X86=	
• 14	the entry in colum	na 1 is loss than the					1	145=		OR	+290=	
H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
. T	he *Highest Num	ber Previously Paid	For* (Total or	Independent	ess than i) is the l	i 3, enter "3." highest number		in the appr	opriate box			